

September 2013

1. Website Redesign — Other than direct contact and live, in-person services, most of the resources that we offer the fleet reside on (or are delivered via) our website. The Naval Safety Center possesses a wide-ranging and diverse set of subject matter experts. As a result, the web site tends to grow, sprawl and get less user-friendly. We tackled that problem and if you'll check out our new main page, you'll see we've made a dramatic improvement. We cut the number of images, links and text by about a third, so the page is much less cluttered and scattered. We simplified the nav bars, emphasizing command services rather than command structure. With new icons and buttons, visitors will find it much easier to find popular and important items. New scrolling headers provide a fuller view of the scope of NSC expertise and responsibility. Check it out at http://www.public.navy.mil/navsafecen/.



2. **Command Safety Self Assessments Have a Long Way To Go** – These assessments are required annually. Although the task of preparing them usually falls on the safety department, the assessment is a look at the entire command, not just the activities of the safety staff. Input is necessary from all departments and commands using Base Operating Support (BOS) safety services.

Is your safety department resourced to support all requirements, especially in the current fiscal environment? Are your safety professionals trained to meet requirements? Are your supervisors trained to provide a basic safety walk-through of their work centers?

Many of the self-assessments from 2012 that we reviewed missed the mark. They read more like brag sheets, and didn't address common problems such as documented shortfalls, underfunding, understaffing and duplicate data-bases. Do your safety-related databases provide the information you require? Is any of the data redundant? Is any of your equipment outdated or out of calibration?

If your command self assessment shows that everything is good to go locally, and there is a mishap, what is the investigation going to show? If the mishap investigation reveals poor preparation, substandard equipment or insufficient training, did the self-assessment show these problems as well?

Information on self assessments can be located on the OSH drop down menu at http://www.public.navy.mil/navsafecen/Pages/osh/nsar-index.aspx.

3. **Issues Remain with Shipboard GFE Programs** – The fleet has done a tremendous job in improving the Gas-Free Engineering program in recent years, particularly in terms of repeat discrepancies found by Naval Safety Center survey teams. However, the surveyors continue to find problems: improper designation letters, expired calibration gas, lack of the safety officer's annual audit, and incomplete documentation of training. During recent surveys of surface ships, roughly 60% had discrepancies with the GFE program.

Ensuring the safety of personnel who enter confined spaces is of paramount concern because of the hazardous nature of the design of some compartments and the lack of



access for rescue personnel. Spaces that might be found to be Immediately Dangerous to Life and Health (IDLH) include AFFF systems, chemical and fuel oil tanks, and sewage Collection Holding and Transfer (CHT) tanks and piping. These situations require the commanding officer's approval signature on both requests and certificates. Given some of the problems we're seeing, that signature shouldn't be given lightly or as a matter of course.

The standards set in the OPNAV and NSTM are clear. Meeting them takes time and attention. Here are the links:

- Search for OPNAVINST 5100.19E at http://doni.daps.dla.mil/allinstructions.aspx (the guidance is in Vol. I, Part I).
- NSTM 074 -http://www.public.navy.mil/navsafecen/Documents/afloat/Submarines/Medical_HAZMAT/NST
 M 074 Gas Free Engineering Vol-3 Rev-6 01Aug11.pdf.
- 4. Data Mining Ongoing and Relevant Although the Naval Safety Center staff is always ready to answer questions about mishap trends, our statisticians don't just wait for stakeholders to ask. The Operations Research division has completed 36 formal projects going back to 2008, including analyses of mishaps involving electric shocks, PT, small arms and ATVs.

The latest project looked at mishap rates for Hornet squadrons, comparing the rates during extended periods of reduced flight hours with periods of normal flight operations. We found that the overall flight mishap rate during periods of reduced flight hours was statistically significantly higher than during normal operating periods. The overall ground mishap rate was the opposite of the flight rate – it was statistically

A full list of the Operations Research projects is at www.public.navy.mil/navsafecen/Pages/statistics/ops_research/ops_res_proj.aspx.

significantly lower than the normal operations rate.

5. **Medical Surveillance** – Working with the Navy Medical Surveillance Working Group, my staff has developed two resources to help address shortfalls identified during last year's baseline medical-surveillance reporting initiative.

The Navy Safety and Supervisor's Guide to Medical Surveillance describes requirements, program elements, stakeholder roles and responsibilities. It can be downloaded from our website's Medical Surveillance Toolbox page at http://www.public.navy.mil/navsafecen/Pages/osh/MedSurv.aspx.

The Supervisor's Medical Surveillance and Certification Exam Referral form (SECNAV 5100/1T) streamlines identifying, enrolling and tracking personnel who require medical surveillance or medical certification. It greatly improves communications between command supervisors, safety personnel and supporting clinics. The form is available at https://navalforms.documentservices.dla.mil/formsDir/_SECNAV_5100_1T_10914.pdf.

